



ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		7/22/94
O.I.P.E. CLASSIFIER		15	7-26-94
FORMALITY REVIEW	LH	60105	8-5-94

INDEX OF CLAIMS

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Rejected
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Allowed
- (Through numeral).....

Canceled
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Restricted
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Non-elected
- I

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Interference
- A

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Appeal
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Objected

Claim		Date			
Final	Original				
	1	✓	✓	✓	✓
	2	✓	✓	✓	✓
	3	✓	✓	✓	✓
	4	✓	✓	✓	✓
	5	✓	✓	✓	✓
	6	✓	✓	✓	✓
	7	✓	✓	✓	✓
	8	✓	✓	✓	✓
	9	✓	✓	✓	✓
	10	✓	✓	✓	✓
	11	✓	✓	✓	✓
	12	✓	✓	✓	✓
	13	✓	✓	✓	✓
	14	✓	✓	✓	✓
	15	✓	✓	✓	✓
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Claim		Date			
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Claim		Date			
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If more than 150 claims or 10 actions
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